EXECUTIVE LOBBYING EXPENDITURE REPORT			#19			
FORM 50			1	Executive Lob	byist Registration No.	
COVERING JANUARY 1 - JUNE 30,	DUE /	AUGUST 15	0			
COVERING JANUARY 1 - DECEMBER	31,2007.	DUE FEBRUAS	Y 15		FOR OFFICE USE ONLY Postmark Date 2017 of	
			10100000 1010000			
<u>ail to: t</u> he Board of Ethics, 2415 Quail Dr., 3rd R	i Floor, Bator	i Kouge, LA 70	808			
x to: (225)763-8787 or (225)763-8780			223		1974/2014-1200-120	
n 18		8	8	0	3071090	
1. Name <u>C055C</u>	First	ark	10	<u>K </u>		
at 11 Avant	line a	v. Ro	Lu Da	ine la Ti	0800	
2, Business Address: 7.2.21 DYOOK Street and No.	nne a	City	State :	J zip	0001	
Mailing Address Same						
Hading Medico LTM714	100			- XR		
3. Business Phone (225) 928-	0026					
Area Code and	Telephone Nat	n ber	∃ Ø			
 Total of all executive lobbying expenditure (Include expenditures from Schedules A and 		ry 1 through Ju	ine 30: \$_	 _		
Total of all executive lobbying expenditures (When Applicable) (Include expenditures fi			mber 31: \$_	-6		
 Total of all executive labbying expenditure (Line 4 added to Line 5 should equal Line 6) 	es made durin	g calendar year		8	74 	
7. Did you make an expenditure exceeding \$	50 он опе осо	asion for an ex	scutive branc	h official:	pered pages were d no information	
From January 1 through June 30?	Yes		No D	GSSING NUMBER	pered pages were	
From July 1 through December 31?	Yes					
If the answer to either question in Number	er 7 above is Y	ES, complete S	chedulc A su	Jaden.		
8. Did you make expenditures exceeding the	sum of \$250 t	for an executive	branch offic	ial;		
From January 1 through June 307	Yes		₩ <u>ज</u>	·	F -	
From July 1 through December 317	Yes		№ 🗖	✓ NA □	<u>-</u>	
If the answer to either question in Numbe	r B above is Y	ES, complete S	chedule A and	à ettech,		
			5:000000000000000000000000000000000000		- C	
Did you expend funds for any reception, so officials were invited during this reporting		g, or other fund	tion to which	h more than rwenr	y-five executive-branch	
	П	No			ς φ [
DATE:	W 180000	100 and 100 an	181		<u>o</u> ,	
If the answer to Number 9 above is YES, or	omplete Sche	dule B and atta	ch.			
Form 507, Rev. 7/04		Page 1 of <u></u>			HAND DELIVERED	
				574, 345, 112, 100, 100, 100, 100, 100, 100, 100		

b. Total of all expenditures made July I through December 31:
(When applicable)

d. Total of all expenditures made during the calendar year:

3. A. Name of Department and Individual Agency:

b. Total of all expenditures made July I through punc 30:

c. Total of all expenditures made July I through junc 30:

c. Total of all expenditures made July I through December 31:
(When applicable)

d. Total of all expenditures made July I through December 31:

(When applicable)

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.